

# Foster Family Home - Corrective Action Report

**Provider ID:** 2-160009

**Home Name:** Florabel Dalmacio, CNA

**Review ID:** 2-160009-6

15-1987 32nd Avenue

Reviewer: Terri Van Houten

Kea'au HI 96749

Begin Date: 3/18/2021

Foster Family Home	Required Certificate	[11-800-6]
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6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.(d)(1) - Unannounced home inspection for 2 bed CCFFH recertification. Report issued during home inspection with written plan of correction due to CTA by 4/18/2021.

Foster Family Home	Background Checks	[11-800-8]
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8.(a)(1) Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

Comment:

8.(a)(1) - Lapse in state name check for CG#1 (Due 1/17/21, completed 3/17/21) and CG#2 (Due 1/17/21, done 3/16/21)

Foster Family Home	Information Confidentiality	[11-800-16]
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16.(b)(5) Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

16.(b)(5) - No evidence present in CCFFH that CG#1, 2, 3, 4 or 5 were trained on Confidentiality and client privacy rights

Foster Family Home	Personnel and Staffing	[11-800-41]
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41.(a)(4) Have a substitute caregiver who will assume caregiving responsibilities in the absence of the primary caregiver.

41.(b)(8) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(a)(4)- CG#3 and 4 did not have an SCG disclosure form complete.

41.(b)(8) - CG#1, 2, 3 and 5 did not have evidence of recent BBP/Infection control education within the last year.

Foster Family Home	Fire Safety	[11-800-46]
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46.(a) The home shall conduct, document, and maintain a record, in the home, of unannounced fire drills at different times of the day, evening, and night. Fire drills shall be conducted at least monthly under varied conditions and shall include the testing of smoke detectors.

Comment:

46.(a) - CCFFH did not have evidence of fire drills conducted in May 2020, June 2020, March 2019, or April 2019

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Foster Family Home

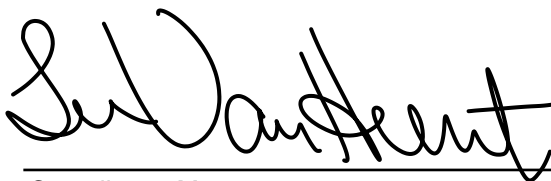
Quality Assurance

[11-800-50]

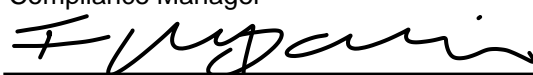
50.(a) The home shall have documented internal emergency management policies and procedures for emergency situations that may affect the client, such as but not limited to:

Comment:

50.(a) - CCFFH did not have evidence of a Internal Emergency Management policy in place.



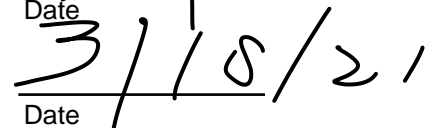
Compliance Manager



Primary Care Giver



Date



Date

CTA RN Compliance Manager: Terri Van Houten

**Community Care Foster Family Home (CCFFH)  
Written Corrective Action Plan (CAP)  
Chapter 11-800**

PCG's Name on CCFFH Certificate: Florabel Dalmacio

(PLEASE PRINT)

CCFFH Address: 15-1987 32nd. ave. Keegan, HI 96749

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
8-a.1	lapses cannot be corrected.	3/17/21	I will use a sticky note in the binder to remind me of document renewal date, to avoid lapses.
14-b.5	All CGs were provided training on confidentiality policies and procedures and client privacy rights signed by CGs.	3/19/21 4/4/21	All CGs will be trained on confidentiality and privacy rights upon hire to the CCFFH.
11-a.4	CG4 cannot be corrected. Obtained Disclosure Form for CG3.	3/18/21 3/19/21	I will <del>use</del> inform all CGs to obtain, sign a Disclosure upon hire to the CCFFH.
41-b.8	obtained BBPI infection control education for CG1, 2, 3 and 5. placed in home record.		I will use a sticky note in the binder to remind me of document renewal date, 1 month before due date.

X All items that were fixed are attached to this CAP

PCG's Signature: F DalmacioDate: 4.15.21

X CTA has reviewed all corrected items

CTA RN Compliance Manager: Tern Van Houten

**Community Care Foster Family Home (CCFFH)  
Written Corrective Action Plan (CAP)  
Chapter 11-800**

PCG's Name on CCFFH Certificate: Florabel Dalmacio

(PLEASE PRINT)

CCFFH Address: 15-1987 32nd ave. Kegan, HI 96749

(PLEASE PRINT)

Rule Number	Corrective Action Taken – How was each issue fixed for each violation?	Date each violation was fixed	Prevention Strategy – How will you prevent each violation from happening again in the future?
44.9	lapse cannot be corrected.	March '19 April '19 May '20 June '20	all fire drill evidences were placed <del>in</del> all together in home records.
50.9	PCG obtained Internal Emergency Management policies and procedures.		i will assure policy and procedures are obtained and keep in home records.

X All items that were fixed are attached to this CAP  
PCG's Signature: flordalmacio

Date: 4-15-21

X CTA has reviewed all corrected items